

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION: | U.S. | ID NO. | DATE |
|---------------------------|------|--------|----------|
| FEE DETERMINATION | H17D | | 11-15-91 |
| O.P.E. CLASSIFIER | | 43 | 11/23/91 |
| FORMALITY REVIEW | OK | 1020 | 11/27/91 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected
 ○ Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | ✓ | 10/4/91 | |
| 2 | ✓ | 3/2/93 | |
| 3 | ✓ | 7/2/93 | |
| 4 | ✓ | 7/2/93 | |
| 5 | ✓ | 7/2/93 | |
| 6 | ✓ | 7/2/93 | |
| 7 | ✓ | 7/2/93 | |
| 8 | ✓ | 7/2/93 | |
| 9 | ✓ | 7/2/93 | |
| 10 | ✓ | 7/2/93 | |
| 11 | ✓ | 7/2/93 | |
| 12 | ✓ | 7/2/93 | |
| 13 | ✓ | 7/2/93 | |
| 14 | ✓ | 7/2/93 | |
| 15 | ✓ | 7/2/93 | |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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